

# BASIC INFORMATION

Straumann® Anatomic  
Healing Abutments XC (AHA)



*Technical handling information*

*System overview*

## ABOUT THIS GUIDE

This surgical and prosthetic procedure describes the steps required for the placement and restoration options for the Straumann® Anatomic Healing Abutment XC (AHA). The Straumann® Anatomic Healing Abutment XC is recommended for use only by clinicians and dental technicians with advanced dental treatment skills. It is assumed that the user is familiar with placing dental implants and designing screw-retained or cement-retained customized prosthetic reconstructions.

**Note:** This guide does not include all the information needed for restoration design, but references to existing Straumann® procedure manuals with further details of restoration design are provided throughout the guide.  
Not all products shown are available in all markets.

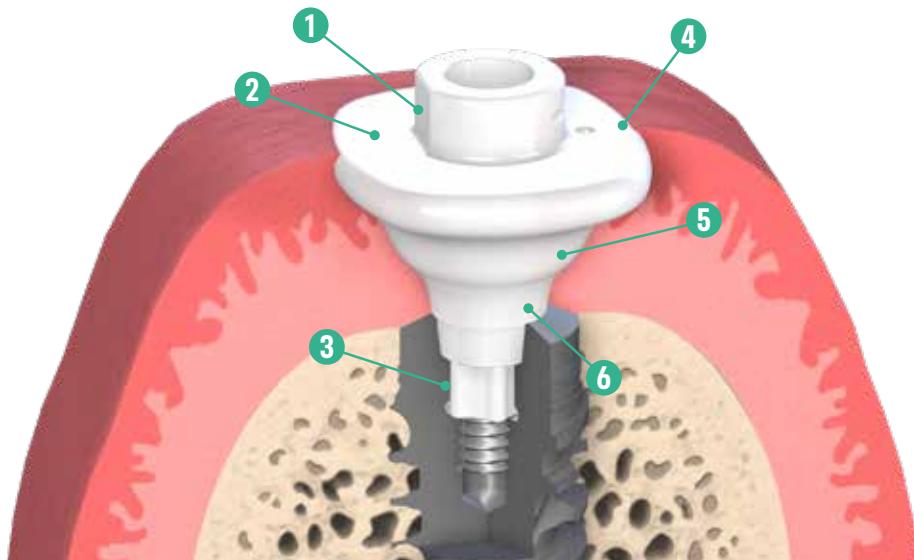
Implant-borne superstructures require optimal oral hygiene on the part of the patient. This must be considered by all involved parties when planning and designing the restoration.

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# 1. STRAUMANN® ANATOMIC HEALING ABUTMENTS XC

Off-the-shelf Straumann® Anatomic Healing Abutments XC (AHA) have pre-defined anatomic emergence profiles with integrated scanbody. Since a Straumann® Anatomic Healing Abutment XC eliminates the need to use a separate healing abutment and scanbody, it reduces multiple disconnections and reconnections of prosthetic components and minimizes the disruption of peri-implant tissue during the healing phase. An IOS readable identification code represents the type of Straumann® Anatomic Healing Abutment XC used, and the codes are visible in the laboratory STL files. All Straumann® Anatomic Healing Abutments XC are delivered with a pre-assembled RB/WB or WB Basal Screw in a sterile package. The features of the Straumann® Anatomic Healing Abutments XC include:



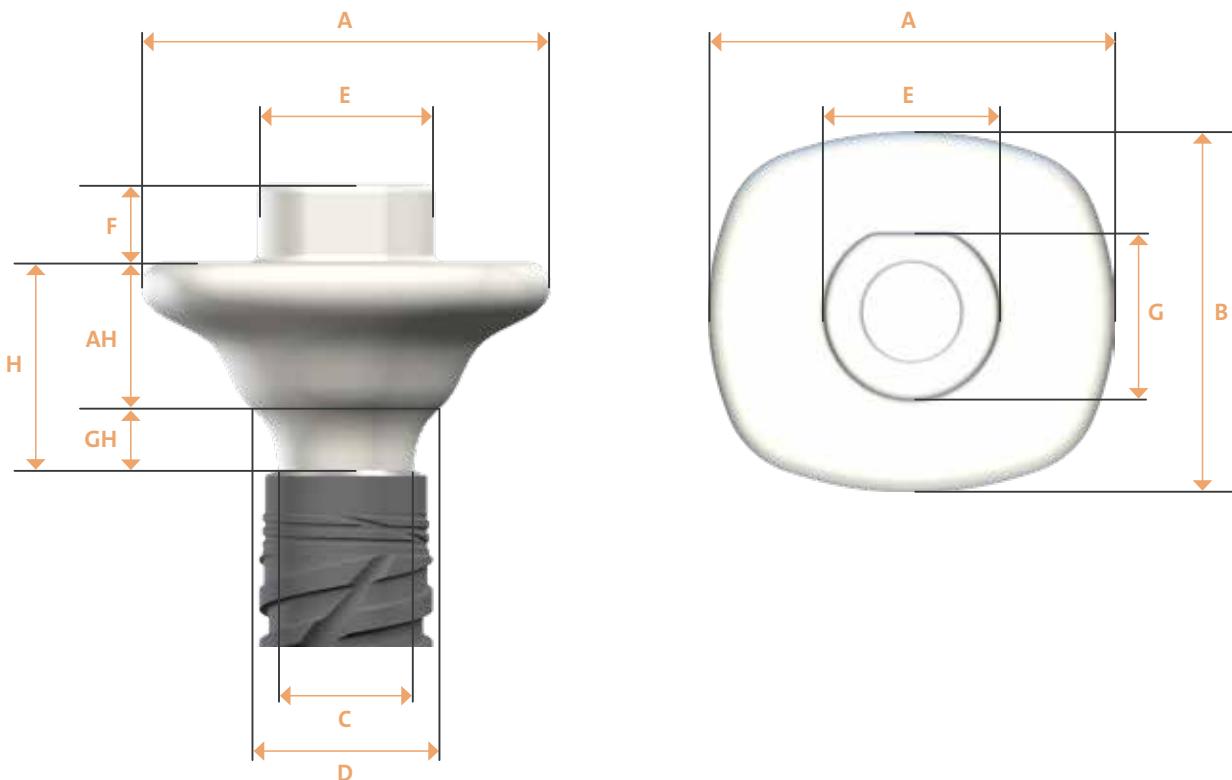
1	One-piece scan-body	<ul style="list-style-type: none"><li>Scanning feature, enables intraoral scanning (IOS) at tissue level</li><li>The flat surface aligns with the orientation of the TorcFit™ connection</li></ul>
2	Peek material	<ul style="list-style-type: none"><li>Scanning capabilities, no need to use scan spray or powder</li><li>Chairside modifications can be made to the gingiva profile</li></ul>
3	TorcFit™ connection (BLX and BLC)	<ul style="list-style-type: none"><li>To avoid seating errors, the basal screw only engages once the Anatomic Healing Abutment XC is fully seated</li><li>Six rotational positions for implant-abutment alignment</li></ul>
4	IOS readable identification code	<ul style="list-style-type: none"><li>The IOS-readable identification code is visible on the STL scan files.</li></ul>
5	Anatomic emergence profile	<ul style="list-style-type: none"><li>Pre-defined natural tooth shape (AH 3 mm)</li><li>Different shapes available (XL, M, S, S1)</li></ul>
6	Consistent emergence profiles™	<ul style="list-style-type: none"><li>Following the Consistent Emergence Profiles™ concept of the Straumann® final abutments</li><li>Available in two different heights (GH 1.5 mm &amp; GH 2.5 mm)</li></ul>

The Straumann® Anatomic Healing Abutment XC is available in:

- 4 shapes designed according to typical tooth shapes in specific areas of the dentition\*:
  - S Shape:** Designed for upper central incisors and upper canines
  - S1 Shape:** Designed for upper lateral incisors, lower central and lateral incisors, and lower canines
  - M Shape:** Designed for upper and lower premolars
  - XL Shape:** Designed for upper and lower molars
- 4 platform diameters ( $\varnothing$ ) for 2 prosthetic connections (RB/WB and WB): 3.8 mm (RB/WB), 4.5 mm (RB/WB), 5.5 mm (WB), 6.5 mm (WB)
- 2 gingiva heights (GH): 1.5 mm, 2.5 mm

\* Suggested indication, shapes may be used in different regions based on clinical judgement.

## 1.1 OVERVIEW OF STRAUMANN® ANATOMIC HEALING ABUTMENT XC DIMENSIONS



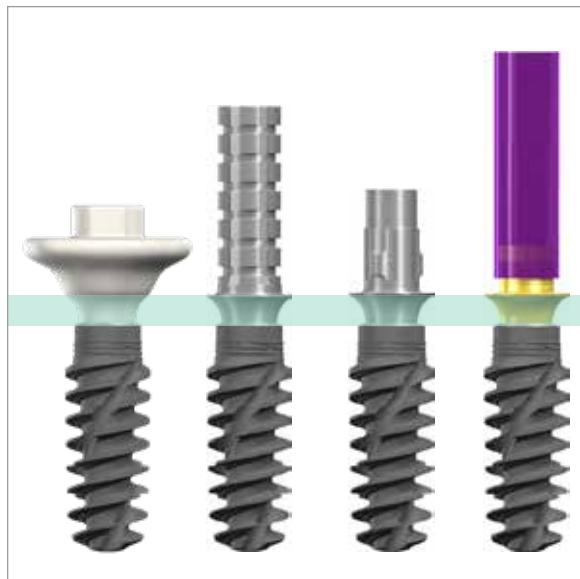
	Art. No.	Connection	(C)   Neck Diameter	(D) Platform Diameter	(GH) Gingiva Height	(AH) Abutment Height	(H) Total Height	(A) Abutment Length	(B) Abutment Width	(E) Scanbody Diameter	(F) Scanbody Height	(G) Scanbody Width					
S Shape	064.4432S	RB/WB	$\varnothing 2.9\text{ mm}$	$\varnothing 3.8\text{ mm}$	1.5 mm	3.0 mm	4.5 mm	6.7 mm	5.9 mm	$\varnothing 3.8\text{ mm}$	1.7 mm	3.6 mm					
	064.4433S				2.5 mm		5.5 mm										
	064.4514S				1.5 mm		4.5 mm	6.2 mm	4.7 mm								
	064.4515S				2.5 mm		5.5 mm										
	064.4452S				1.5 mm		4.5 mm	7.7 mm	5.2 mm								
S1 Shape	064.4453S	WB	$\varnothing 4.5\text{ mm}$	$\varnothing 5.5\text{ mm}$	2.5 mm		5.5 mm		$\varnothing 3.8\text{ mm}$								
	064.4482S				1.5 mm		4.5 mm	5.5 mm					7.9 mm				
	064.4483S				2.5 mm		5.5 mm										
	064.8482S				1.5 mm		4.5 mm	8.9 mm					7.9 mm				
	064.4510S				2.5 mm		5.5 mm										
XL Shape	064.4522S	WB	$\varnothing 3.9\text{ mm}$	$\varnothing 5.5\text{ mm}$	1.5 mm	4.5 mm	4.5 mm	8.9 mm					7.9 mm				
	064.4523S				2.5 mm		5.5 mm										
	064.4522S			$\varnothing 6.5\text{ mm}$	1.5 mm	4.5 mm	4.5 mm										
	064.4523S				2.5 mm		5.5 mm										

## 2. CONSISTENT EMERGENCE PROFILES™, OVERVIEW OF MATCHING COMPONENTS

The Straumann iEXCEL™ Bone Level Implant line emphasizes esthetic outcomes through tailored solutions that support natural soft tissue shaping and maintenance. A key factor in achieving these results is consistent soft tissue management.

Straumann® Anatomic Healing Abutment XC abutments are designed to align with this philosophy, following the Consistent Emergence Profiles™ established across the iExcel prosthetic portfolio—including healing, temporary, and final abutments. This ensures a uniform emergence profile throughout the treatment process.

Each Straumann® Anatomic Healing Abutment XC features a standardized abutment height (AH) of 3 mm above the defined gingival level. This consistent and anatomically shaped emergence profile supports optimal gingival adaptation and supports a predictable esthetic result.

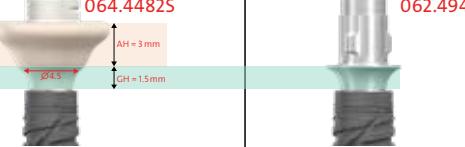


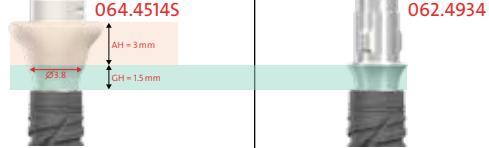
**Figure 1:** Consistent emergence profile due to matching components (RB).

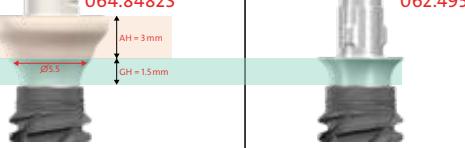


**Figure 2:** Consistent emergence profile due to matching components (WB).

S Shape			
$\varnothing 3.8$	RB/WB Anatomic Healing Abutment	$\varnothing 3.8$	Final Abutment
GH 1.5 mm			062.4934
			062.4935

XL Shape			
$\varnothing 4.5$	RB/WB Anatomic Healing Abutment	$\varnothing 4.5$	Final Abutment
GH 1.5 mm			062.4944
			062.4945

S1 Shape			
$\varnothing 3.8$	RB/WB Anatomic Healing Abutment	$\varnothing 3.8$	Final Abutment
GH 1.5 mm			062.4934
			062.4935

XL Shape			
$\varnothing 5.5$	WB Anatomic Healing Abutment	$\varnothing 5.5$	Final Abutment
GH 1.5 mm			062.4954
			062.4955

M Shape			
$\varnothing 3.8$	RB/WB Anatomic Healing Abutment	$\varnothing 3.8$	Final Abutment
GH 1.5 mm			062.4934
			062.4935

XL Shape			
$\varnothing 6.5$	WB Anatomic Healing Abutment	$\varnothing 6.5$	Final Abutment
GH 1.5 mm			corresponding final abutment is under development
			corresponding final abutment is under development

**Note:** The customized abutment portfolio is available; however, not all options may be offered.



Do not place WB AHAs on RB Implants!



# 3. SURGICAL PROCEDURE FOR STRAUMANN® ANATOMIC HEALING ABUTMENT XC

The workflow for the surgical procedure of the Straumann® Anatomic Healing Abutment XC (AHA) involves the following steps:

- Step 1 – Preoperative planning (optional)
- Step 2 – Implant placement
- Step 3 – AHA insertion
- Step 4 – Intra oral scanning

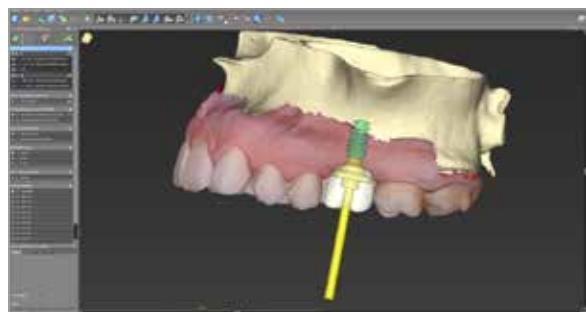
## 3.1 STEP 1 – PREOPERATIVE PLANNING (OPTIONAL)

Prosthetic-driven preoperative planning is essential, and close communication between the patient, dentist, surgeon, and dental technician is crucial for achieving optimal esthetic results.

### coDiagnosiX®

Anatomic healing abutments (AHAs) are integrated into pre-operative planning using the digital tools in coDiagnosiX®. This 3D diagnostic and implant planning software allows image-guided surgical planning and includes a comprehensive digital library of dental implants.

The software works with patient medical image data from CBCT (Cone Beam Computed Tomography) or DVT (Digital Volume Tomography) scans processed by coDiagnosiX®. This enables detailed surgical planning of the implant type and position, considering the bone structure and available soft tissue post-extraction. The software also allows visualization of the implant and abutment design in relation to the patient's bone anatomy, supporting precise, patient-specific treatment planning.



### CARES® Synergy workflow

CARES® Synergy provides real-time communication between the implant planning software (coDiagnosiX®) and the lab design software (e.g. Straumann® CARES® Visual), and visualizes the relationship between the proposed implant position and the proposed restoration.



### Smile in a Box®

Smile in a Box® is a streamlined service that provides an all-in-one solution for implant cases, from digital treatment planning to the delivery of surgical guides and prosthetics.



## 3.2 STEP 2 – IMPLANT PLACEMENT

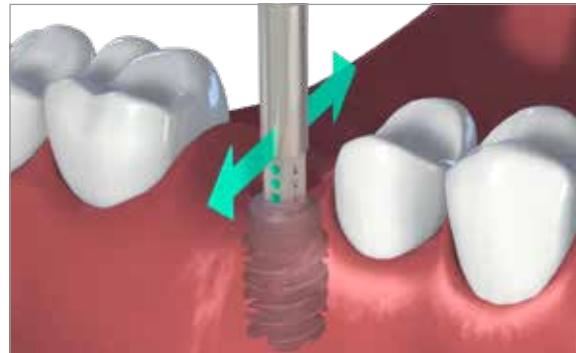
For detailed guidance on implant placement, please refer to the following resources:

- *Straumann® BLC Implant System, Basic Information* (USLIT.1644/ CALIT.1644)
- *Straumann® BLX Implant System, Basic Information* (USLIT.1205/ CALIT.1205)
- *Straumann® Guided Surgery System Instruments, Basic information* (NAMLIT.1719)

**Important Note:** To ensure proper alignment of the AHA with the implant:

#### For free-hand placement:

Align the orientation dots on the implant driver in the buccal-lingual direction at the final step of placement of the implant.



#### For guided placement:

At the final step, ensure that the orientation dots on the implant driver and the guide markers (lines) are aligned in the buccal-lingual direction, so that the planned AHA orientation matches the implant orientation.

Once the implant is placed, gently pull the Guided Implant Driver out vertically. For a screw-retained Guided Implant Driver, loosen the fixation screw and gently pull out vertically.

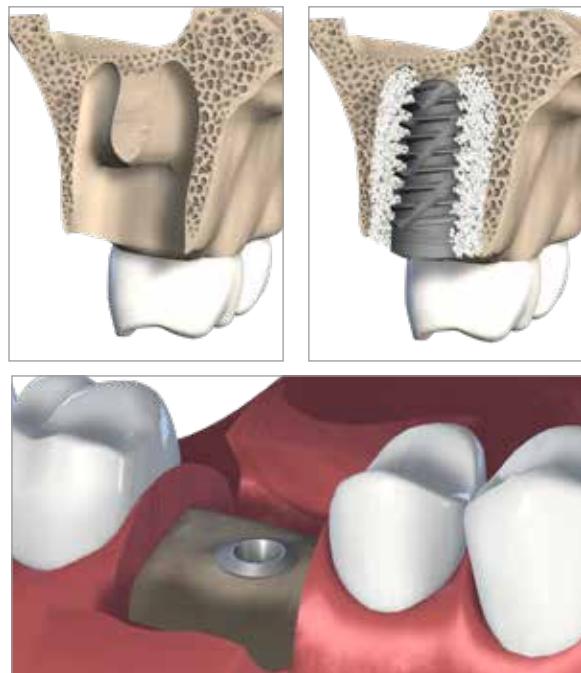


If necessary, biomaterials can be used to fill the alveolar socket surrounding the implant.

**Note:** Normally, the AHA covers the surrounding area where the biomaterial needs to be placed. The implant driver is preferred.

The AHA or implant driver can be put in place to seal the implant interface during the biomaterial filling process.

Before positioning the AHA, ensure that the internal configuration of the implant is clean and free of blood and other contaminants.



### 3.3 STEP 3 – STRAUMANN® ANATOMIC HEALING ABUTMENT XC INSERTION

The Anatomic Healing Abutments XC are available in a variety of shapes and sizes to fit individual patient needs. The first step is the selection of the right anatomic healing abutment XC, ensuring compatibility with the patient's anatomy. This can be done by following one of two methods.

**Conventional:** Chairside selection, measuring gingival height with a periodontal probe.

**Digitally supported:** Straumann® Anatomic Healing Abutments XC can be incorporated into digital preoperative planning using planning software such as coDiagnosiX®.

The PEEK material of the Straumann® Anatomic Healing Abutment XC also allows for chairside modifications, for patient cases where a specific shape is required. A detailed description of the specific procedures is given below.

#### 3.3.1 Standard AHA Workflow

The following describes the clinical steps involved when placing the Anatomic Healing Abutment XC without any modification of its shape.

##### Step 1 – Open sterile packaging

Open the sterile double blister containing the AHA.



### Step 2 – Pick-up the AHA

Pick up the AHA with the pre-assembled self-retaining screw using the SCS screwdriver.



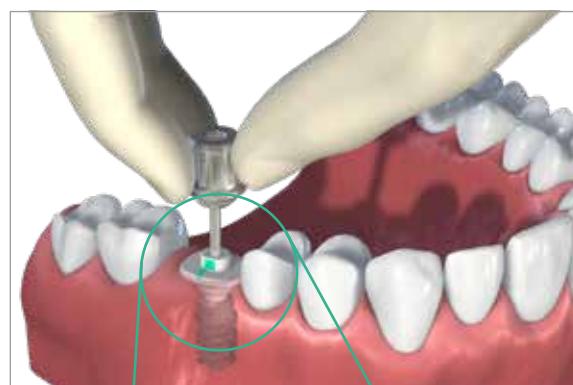
### Step 3 – Securing against aspiration

Prevent aspiration of the AHA and the screw by ensuring that the SCS Screwdriver and the screw properly engage when you pick up the screw.



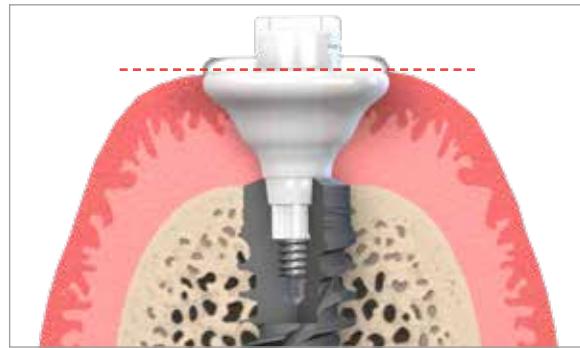
### Step 4 – Placement

Mount the AHA with the screw on the implant using the Straumann® SCS Screwdriver. Check for proper fit and for any rotational or vertical looseness of the AHA in the implant. Hand-tighten the self-retaining screw (14 Ncm).



**Note:** Be sure to orient the flat surface of the AHA scan-body buccally (not adjacent to the approximal teeth). Avoid any contact of the AHA with the bone surrounding the implant, or with the neighboring teeth and the antagonist teeth.

**Note:** The upper part of the AHA should be flush with the gingiva (or slightly higher).



#### Step 5 – Closure of the screw access hole

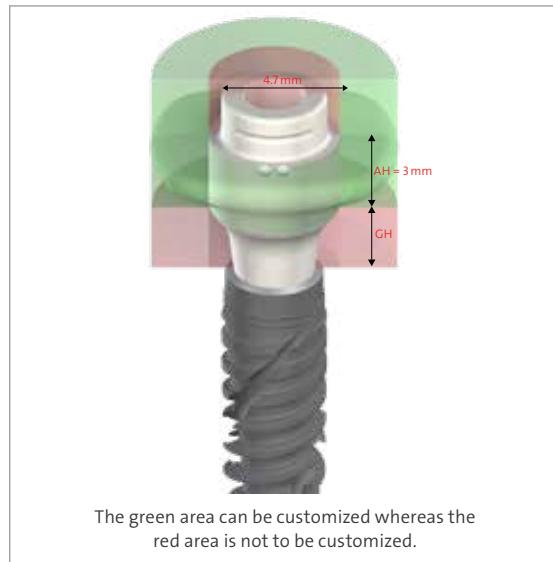
To protect the screw head and prevent debris ingress during the healing phase. The screw head should be closed with absorbent cotton or gutta-percha and a sealing compound (e.g. composite restorative material).



#### 3.3.2 Customized Straumann® Anatomic Healing Abutment XC Workflow

These steps describe the clinical steps involved when placing the Anatomic Healing Abutment XC after the shape of the Straumann® Anatomic Healing Abutment XC has been modified.

**Note:** For the modification limits, please refer to the graphic on the right. To protect the consistent emergence profile of the final abutment, a maximum of 3 mm height below the occlusal surface can be modified. To preserve the required scanning function of the AHA, a 4.7 mm diameter circular area around the central axis of the screw channel cannot be modified.



The green area can be customized whereas the red area is not to be customized.

### Step 1 – Individualization

Individualize the AHA on an analog and/or surgical handle outside the mouth according to the clinical need. Heatless wheels and new cross-toothed millers are recommended for grinding. To avoid smearing the polymer, adjust burr speed properly (low rpm, exert low force on the surface).



Place the customized AHA in the back of TorcFit™ Surgical Handle (066.4000), in the recess for holding TorcFit™ prosthetic components, or a suitable TorcFit™ repositional analog (Article reference for RB 065.0023 and for WB 065.0024).



### Step 2 – Perform a 360° scan of the new emergence profile

Perform a 360° scan of the new customized emergence profile, to allow the CAD designer to duplicate the modification in the final restoration.

**Note:** Be sure that the 360° scan file together with the intra-oral scan file are provided to the CAD/CAM designer so that the two scans can be matched.



### Cleaning and disinfection

Clean, disinfect and sterilize the customized AHA before inserting it in the patient's mouth. Please refer to the instructions for use for sterilization and disinfection recommendations.

After sterilization, the AHA is ready to be placed in the patient's mouth. Please follow Steps 2 – 5 of the standard AHA workflow for the subsequent procedure.

### Handling Precautions:

- AHA components are made of PEEK and can be damaged by sharp tools.
- Avoid squeezing or applying pressure to the sensitive areas, such as the scan body on the occlusal side.
- If damage to the AHA does occur, then please use a new AHA component.

## 3.4 STEP 4 - INTRAORAL SCANNING

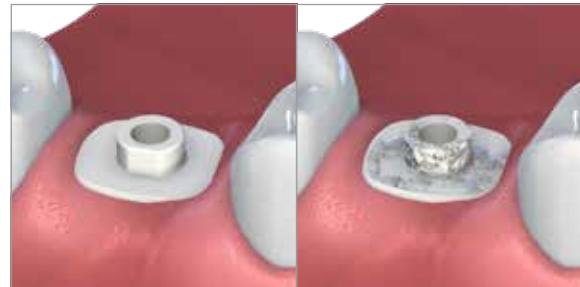
The scan can be done the day of the surgery or after the healing phase. Since the AHA combines a healing abutment with a scanbody, it must not be removed for the scanning step of the workflow.

For scanning after the healing phase, please check the scanbody surface for damage. If there is damage do not use the scanbody, and insert a new scanbody to accurately identify the implant position.

**Warning:** The scanning function of AHA should only be used for a single-unit restoration.

### Step 1 – Cleaning of AHA

Before initiating the scanning phase, ensure that the AHA is clean and free of any visible plaque and that no visual defects are observed, especially on the scanbody feature. This preparation is essential for obtaining accurate digital impressions.



### Step 2 – Scanning

The AHA is now ready for scanning. Ensure the correct orientation of the AHA during placement, in order to avoid deformation or inaccurate scan information regarding the positioning of the implant, model analog or abutment. Also, ensure the scan accurately captures the surface and margins of the AHA.



Follow the scanning instructions provided with the scanner. Straumann recommends use of the Virtuo Vivo™, Straumann SIRIOS™ and TRIOS® scanners.

Start scanning the occlusal surface, and move laterally to capture all details of the AHA.

Review the scan to confirm accurate capturing of the scanbody and AHA margins. Retake the scan if necessary.

For more accuracy, use a high-resolution mode if available.



**Note:** AHA libraries in the design software include the emergence profile, an **additional gingiva scan is not necessary in IOS protocols**.

Straumann® recommends selecting the "Crown workflow" when using Straumann SIRIOS™ and TRIOS® scanners.

Save the scan data and export it in the required format for the laboratory or dental CAD software processing.

**Note:** The AHA is used like any other digital scanbody/post. The clinician scans the case and sends scans along with the AHA identification number and implant identification to the dental laboratory for manufacture.

# 4. LAB PROCEDURE FOR STRAUMANN® ANATOMIC HEALING ABUTMENT XC

The specific lab procedure for the Straumann® Anatomic Healing Abutment XC (AHA) involves 4 steps:

- Step 1 – Identify the scanned AHA
- Step 2 – Download or use the AHA scanbody library
- Step 3 – Download or use the AHA emergence profile library
- Step 4 – Design final restoration

## 4.1 STEP 1 – IDENTIFY THE STRAUMANN® ANATOMIC HEALING ABUTMENT XC

The AHA is used like any other digital scanbody/post. The scanbody is embedded onto the occlusal surface of the AHA.

- Identify the AHA shape (S, S1, M or XL) using the diagram below

Shape	S	S1	M	XL		
Ø and Platform	Ø3.8 mm RB/WB	Ø3.8 mm RB/WB	Ø3.8 mm RB/WB	Ø4.5 mm RB/WB	Ø5.5 mm WB	Ø6.5 mm WB
GH 1.5 mm						
GH 2.5 mm						

- Indented dots on the occlusal surface in the STL files indicate gingiva height (GH) and platform diameter ( $\varnothing$ ).
  - The number of dots represents the GH of the AHA: 1 dot = GH 1.5 mm, 2 dots = GH 2.5 mm
  - Dot placement relative to the scanbody's flat surface shows platform diameter (i.e. top  $\varnothing$ 3.8 mm, bottom  $\varnothing$ 4.5 mm, left  $\varnothing$ 5.5 mm, right  $\varnothing$ 6.5 mm as shown in the image)

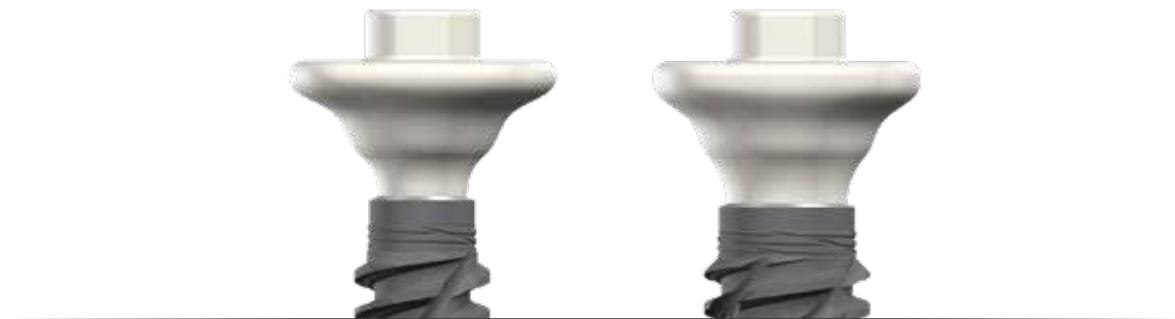
## 4.2 STEPS 2 & 3 – UPDATE LIBRARY FILES & DOWNLOAD AHA EMERGENCE PROFILES

The scanbody part of the AHA represents the position and orientation of the respective dental implant in CAD CAM scanning procedures. This helps the CAD CAM software to correctly align the subsequent CAD CAM restorations. Scan files using AHA can be used in CARES® Visual, 3Shape and exocad design systems – the most current libraries for Straumann® centralized and in-house prosthetics can be found in Dental Implant & Prosthetic CAD CAM Design Library:



In addition to the library files, download the emergence profile 3D-files for CARES® Visual and 3Shape design titled “Anatomic Healing Abutment XC – Emergence Profile 3D-Files” as shown below.

**Note:** When using 3Shape version DS 2024, importing the Emergence Profile 3D files is not necessary. This version includes an auto-recognition feature that automatically matches the AHA emergence profile.



## 4.3 STEP 4 – DESIGN FINAL RESTORATION

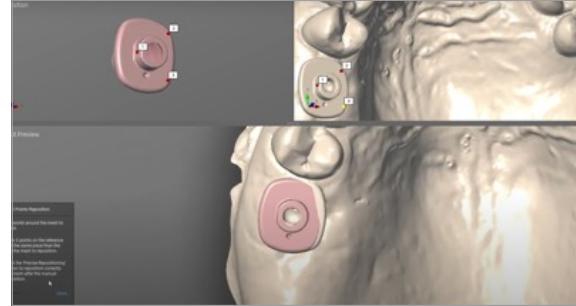
### Step 1 – Case set-up and selection of the correct AHA library

Open the AHA scan in your CAD software. Ensure the scan accurately captures the surface of the AHA above the gingiva.

### Step 2a – Standard AHA Workflow

#### Match AHA emergence profiles

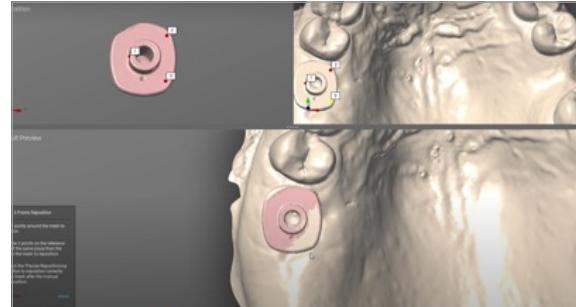
Use the AHA library in the software to align the crown design with the scanned surface of the AHA. Adjust the connection area for a seamless fit.



### Step 2b – Customized AHA Workflow

#### Match customized AHA visible surface profile

Be sure to upload the first 360° scan file to match the visible surface profile of the modified AHA.



### Step 3 – Scanbody matching

3-point positioning of the scanbody should be done when using CARES® visual.



### Design

Utilize the CAD tools to shape the crown, ensuring proper occlusion and contact points. Follow the patient's anatomy and restorative requirements.

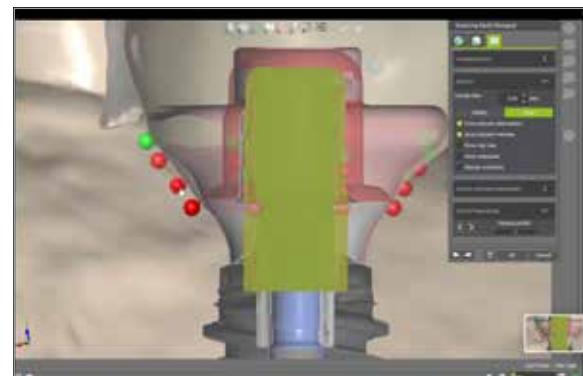


Use the AHA emergence profile library to design the final crown emergence profile.

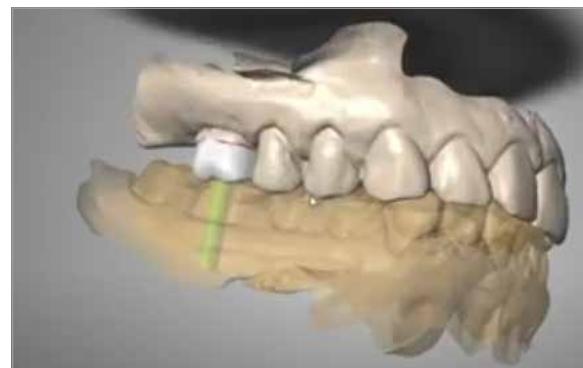
The AHA emergence profile can be found in the Straumann Download Library Center for CARES® Visual and 3Shape design and is titled “Anatomic Healing Abutment XC – Emergence Profile 3D-Files”.



Follow precisely the subgingival profile of the AHA emergence profile library or 360° scan file by adjusting the surface points.



Finalize the design according to the patient's specific anatomy, and send the design of the one-piece custom abutment or a crown for Variobase® to a Straumann central milling center or locally mill the crown.



**Note:** A list of design videos compatible with your preferred CAD software can be found following this link:



# 5. RESTORATION WORKFLOW OPTIONS

The Anatomic Healing Abutments XC (AHA) offer different restoration options to suit various clinical needs. These include off-the-shelf solutions like Variobase® abutments, as well as fully customized abutments, produced from your designs in a Straumann central milling center and in house milling.

## 5.1 STRAUMANN® VARIOBASE®

The Straumann® Variobase® prosthetic components provide dental laboratories with the flexibility to create customized prosthetic restorations. In addition, Variobase® Abutments come with the benefit of the original Straumann® connection.



**Note:** The customized abutment portfolio is available; however, not all configurations or options may be offered.

For detailed instructions on final prosthetics, please refer to *Straumann® Variobase, Basic information* (NAMLIT.1084).

## 5.2 STRAUMANN® PRE-MILLED ABUTMENT BLANKS

Straumann® Pre-milled Abutment Blanks enable original Straumann® one-piece customized titanium abutments to be produced using in-house milling equipment. This enables precise fabrication while maintaining the integrity of the original Straumann implant-abutment connection.

Straumann® Pre-milled Abutment Blanks are compatible with the AK-1-ME Abutment Kit Attachment MEDENTiKA from Roland\* and the Amann Girrbach Blank Holder used in the Straumann® M series.



For detailed instructions on final prosthetics, please refer to *Straumann® Pre-milled abutment blank, Basic information* (NAMLIT.1770).

\*Straumann Pre-mill Abutment blank is only cleared for use with the AK1 system (AK-1-ME) from Roland DGA in the US.

## 5.3 STRAUMANN UN!Q™

Straumann UN!Q™ is a service designed to support the planning, design, and production of patient-specific prosthetics. This outsourced solution allows for on-demand customization of implant prosthetics tailored to specific clinical needs. It offers an efficient option for managing cases during periods of high demand or limited in-house resources.



**Note:** The customized abutment portfolio is available; however, not all options may be offered.

For detailed instructions on final prosthetics, please refer to *Straumann UN!Q™* (USLIT.1188).

# 6. FURTHER INFORMATION

For further information please consult the following brochures:

- *Straumann® BLC Implant System, Basic information* (USLIT.1644/ CALIT.1644)
- *Straumann® Bone Level Prosthetic Procedures, Basic Information* (NAMLIT.1133)
- *Straumann® BLX Implant System, Basic information* (USLIT.1205/ CALIT.1205)
- *Straumann® Guided Surgery System Instruments, Basic information* (NAMLIT.1719)
- *Straumann® Variobase®, Basic Information* (NAMLIT.1084)
- *Straumann UN!Q™, Brochure* (USLIT.1188)

# 7. PRODUCT REFERENCE LIST

Art. No.	Image	Article	Description	Material
<b>S shape</b>				
064.4432S		RB/WB S Anatomic Healing Abutment XC	$\varnothing 3.8$ mm, GH 1.5 mm, H 4.5 mm, PEEK/TAN	
064.4433S		RB/WB S Anatomic Healing Abutment XC	$\varnothing 3.8$ mm, GH 2.5 mm, H 5.5 mm, PEEK/TAN	
<b>S1 shape</b>				
064.4514S		RB/WB S1 Anatomic Healing Abutment XC	$\varnothing 3.8$ mm, GH 1.5 mm, H 4.5 mm, PEEK/TAN	
064.4515S		RB/WB S1 Anatomic Healing Abutment XC	$\varnothing 3.8$ mm, GH 2.5 mm, H 5.5 mm, PEEK/TAN	
<b>M shape</b>				
064.4452S		RB/WB M Anatomic Healing Abutment XC	$\varnothing 3.8$ mm, GH 1.5 mm, H 4.5 mm, PEEK/TAN	
064.4453S		RB/WB M Anatomic Healing Abutment XC	$\varnothing 3.8$ mm, GH 2.5 mm, H 5.5 mm, PEEK/TAN	
<b>XL shape</b>				
064.4482S		RB/WB XL Anatomic Healing Abutment XC	$\varnothing 4.5$ mm, GH 1.5 mm, H 4.5 mm, PEEK/TAN	PEEK/TAN
064.4483S		RB/WB XL Anatomic Healing Abutment XC	$\varnothing 4.5$ mm, GH 2.5 mm, H 5.5 mm, PEEK/TAN	
064.8482S		RB/WB XL Anatomic Healing Abutment XC	$\varnothing 5.5$ mm, GH 1.5 mm, H 4.5 mm, PEEK/TAN	
064.4510S		RB/WB XL Anatomic Healing Abutment XC	$\varnothing 5.5$ mm, GH 2.5 mm, H 5.5 mm, PEEK/TAN	
064.4522S		RB/WB XL Anatomic Healing Abutment XC	$\varnothing 6.5$ mm, GH 1.5 mm, H 4.5 mm, PEEK/TAN	
064.4523S		RB/WB XL Anatomic Healing Abutment XC	$\varnothing 6.5$ mm, GH 2.5 mm, H 5.5 mm, PEEK/TAN	

**Note:** Product availability may vary by market.

# NOTES

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